

MEDICAL EDUCATION IN IRELAND

by

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GENERAL CONSIDERATIONS ON MEDICAL EDUCATION IN IRELAND.

Traditions in the Teaching of Medicine.

Throughout all the schools, including Belfast, it is clearly apparent that a dominating characteristic of medical education is the tendency to emphasise the authority of the practitioner, and the importance, in the future of the students, of such training and experience as will enable a young man, immediately after graduation, to undertake a practice, rough and ready if need be, under the conditions which obtain in Ireland and England or anywhere in the Colonies.

The effectiveness of the medical training is judged more, apparently, by the ready facility of the newly fledged doctor to deal with the varied demands of general practice than by the thoroughness with which he pursues studies following his graduation or the number of places available for men wishing to enter research or teaching. Irish Medical Schools take little account of the necessities of developing teachers, and even less of the desirability of training research men. This shows itself in the almost careless attitude assumed towards the medical sciences or thoroughness of instruction in these branches. Everywhere, the standards seem to be to teach no more than the "ordinary general practitioner would need" of the various preliminary and essential disciplines such as Physiology, Bacteriology and Pathology. As is natural, the favourite recourse of teachers holding such a philosophy is the qualifying examination, and much of the training of the Irish

medical students is nicely calculated to pass the candidate through these examinations rather than to furnish him with a sound preparation in the medical sciences and a lasting conviction that he must remain an investigator and a student to the end of his professional life in order to qualify as a doctor.

It should be noted, however, that this attitude of teachers in Ireland has virtues as well as faults.. It is within the purse of the student and within the budget of the school. It is rare to see any specialty unduly emphasised at the expense of sound common sense, and, although the character of much of the instruction in Ireland suggests the Trade School rather than the University, the product - as experience shows - is at least amply able to maintain itself in competition with the graduates of other schools in the British Isles.

Domination by the practitioner over the character of the teaching is probably responsible for, or indeed may originate from, the wide separation that exists, especially in Dublin, between the clinical and the pre-clinical instruction. Teaching given in the hospitals is almost entirely separate from that of the schools: Men half way through several schools may be congregated into a single hospital to receive the clinical instruction there, and it is in these hospitals more than anywhere else that the authority of the practitioner in medicine, rather than the teacher and investigator, is most apparent.

Another result of the dominance of the practitioner in

medical instruction is expressed in the almost universal expectation in Ireland that medical education be paid for entirely by the students' fees to the College or Hospital. This orientation is in striking contrast to that of some of the more important schools elsewhere in the World. It is responsible for much of the inferiority seen in the teaching of the pre-medical sciences in Ireland.

Were the influence of the teacher and investigator in medicine stronger in the Irish schools, one might expect that attention would long ago have been paid to the markedly inadequate preparation in the courses of Physics, Chemistry and Biology which should precede those of the Medical School.

It is further to be noted that new orientations and change in the methods and objectives of medical education take place more slowly among practitioners or a Faculty dominated by practitioners than under conditions where the academic and research influence is stronger. Probably, therefore, some of the backwardness of pre-medical instruction in Ireland in regard to medicine is due to the dominance of the practitioner's conceptions regarding medical education.

The Excess Number of Medical Schools.

Hard as it is to assign an order of importance regarding the causes of the excess number of schools in Ireland, certainly religious and political differences are largely responsible. Hospitals have been largely fostered by religious groups, and with the Protestant and Catholic religions side by side, medical schools have grown up and flourished with the encouragement of the numerous hospitals.

Prejudices and ambitions, at heart

religious, political, or, at least factional, are responsible for the continued support of both hospitals and medical schools, which might otherwise find existence too difficult.

The economical difficulties of the Irish, the limited amount of land available, and the low development of industry and commerce, tend to make professional careers exceptionally desirable for the ambitious young men of the country who are denied adequate opportunities if they stay at home. Thus, Ireland has exported some 70 to 90 per cent of her medical graduates, and the production of doctors has assumed certain characteristics of an industry dependent on export for its existence.

A moderately good education in medicine afforded to a young man possessing ambition and the traditional Irish genius for dealing with people has ensured to this product for export a better opportunity from the point of view of the individual than any career in Ireland involving a similar amount of expenditure or preparation.

One further point in maintaining a large number of schools in Ireland has been the strong sectional feeling, reinforced by traditional prejudice, and the close attachment of the people to each section of their own country. Thus, Southern Ireland is desirous that Cork shall continue as a University, since their sons need not go far from home nor lose contact with an atmosphere which they understand and sympathise with.

As is true everywhere, a medical faculty ensures to a community a type of medical service and hospital facilities which it is loth to lose, and, once established, a medical faculty is given up only under protest.

Political and Religious Differences.

The problem of medical education, as already indicated, is much complicated by the almost inveterate prejudices existing between the members of two different religious faiths and two different political sympathies.

The relatively recent days of almost incredible violence and bitterness are unfortunately no novelty in Ireland, historically speaking. Such political and religious differences as there have been in the past have resulted in the conviction that "oil and water cannot mix", such a conviction standing behind the incredibility of any fusion of Trinity College and the National University. Tolerance, conciliation and co-operation are aborted by mistrust. This difficulty is, of course, most pronounced in Dublin, but it is precisely in Dublin that the importance of tolerance and conciliation is greatest. These differences have ramifications outside of Ireland, for broadly speaking the American-Irish may be said to be entirely Catholic in sympathy, while those Irish who have had the closest ties with England are Protestant.

In matters of medical education, the religious and political differences are most apparent in the field of hospital

control and in the relations of the Irish schools to the General Medical Council of Great Britain. Protestant schools can hardly expect to enter into satisfactory relations with hospitals controlled by orders of Catholic Sisters (indeed, their administration is galling enough to the medical members of their own religion). The relations between the Free State Government and the General Medical Council of Great Britain have already become strained, not because of the policy of the Council within its appropriate field but because it represents control of Irish education, which is alleged to be imposed from without.

Medical education in Ireland, then, is no simple educational matter but one involving some of the deepest, most sensitive and most maltreated emotions and sympathies of the Irish people.

Inadequate Preliminary Training.

This has been referred to above as possibly one of the results of a strong domination of Medical Education on the part of the practitioners. Putting this possible cause to one side, the fact remains, and it is widely characteristic of the schools in Ireland, that their entering students are quite inadequately prepared to take up the medical sciences. One does not find, as in England, a small group among the entering classes who have been extremely well prepared by University courses in Chemistry, Physics, or even Physiology. One meets, on the other hand, a group of youths

who have come up to the University with almost no training at all in the Sciences which would bear most significantly upon their medical training. The attempt to put Chemistry, Physics and Biology back into the schools has proved a failure, and these courses are given at present in the Universities as though they were unfortunate, but necessary, formalities, to be gotten over with as quickly as possible and with the minimum effort in order to pass admission requirements. Men failing in the first attempt to pass their pre-registration Physics, Chemistry and Biology, are given subsequent opportunities at short intervals until they do, and this contributes to give these subjects the minimum of emphasis and importance in the eyes of the students. There is, indeed, no school preparing for a medical course in Ireland which is adequately equipped to give these courses in Sciences, and consequently no standard exists of what might be done in this particular.

Development of Teachers.

Granted that the present number of schools in Ireland will continue undisturbed, the problem of securing an adequate group of well-trained assistants to become possible future professors in these schools is, within the Free State at least, a serious one. Belfast, though severely handicapped by lack of funds to support young men training themselves for future academic positions, is nevertheless in a better position to draw such material from Scotland and England.

In the schools of the Free State, facilities for the encouragement of such a group scarcely exist, and this unfortunate situation is aggravated by both sectionalism and, in the case of Trinity College and the Royal College of Surgeons, religious and political difficulties. If Galway and the Royal College of Surgeons, as seems not unlikely, are to be given up, it would appear that only Cork, the National University (University College, Dublin) and Trinity College, Dublin, will remain, and certainly not a very large group of young men will enter training for academic careers when the field for such careers is so limited. This does not qualify the statement that it is extremely important for the future of Irish medicine that such facilities should be afforded to the proper type of young man, and in all the schools it was declared that able men were to be sometimes found and could be encouraged to devote themselves to teaching if they could only be helped over the most difficult period of their training. With the exception of Trinity College and Belfast, the main objection and difficulty in a plan of affording young men such opportunities is the fact that neither laboratories nor adequate apparatus exist for more advanced studies. In some cases, indeed, it is doubtful whether the teachers are qualified to develop sufficiently their young assistants. Travelling Fellowships would, therefore, be an essential feature of any such programme.

The Future.Belfast.

The future of Belfast is assured, both in point of support and in regard to number of students. Belfast will not break with the General Medical Council and, should such a break occur in the Free State, Belfast will have an even larger number of students than previously, since graduation there will enable a man to practice in England or in the Colonies, without further difficulty.

In the case of Belfast, one is dealing with a school in close contact and sympathy with the other medical faculties of Great Britain, with a serious-minded and hard-working group of men who are relatively free from the discord of political or religious origin and animated by a sufficiently high tradition as regards standard of work.

Trinity College, Dublin.

Trinity College possesses superior laboratories and superior clinical facilities, in spite of the grave defects of the latter, to any other school in Ireland. It has the sympathy and support of a group in Dublin and in Ireland in general which has fine traditions and considerable intellectual prestige. Trinity College is, furthermore, well enough endowed to continue even at a disadvantage to turn out better trained and influential younger graduates. A further card in Trinity's favour is the natural

and rather intimate relation which it bears to the Universities of England and Scotland and all the advantages which accrue from such communion.

The National University.

University College, Dublin.

The Dublin College of the National University, under the protection of the Free State Government and placed in what is without doubt the only clinical centre of Ireland, is likely to be in the future the most important school in the development of a strictly National programme of medical instruction. It is weak, ineffective and ill supported at the present, and its weakness in the future will be due to the very relationship which may also prove its strength, namely its closer relation with the Free State Government. It seems reasonable to suppose that it will be a matter of several years before the Free State Government fully comprehends its responsibilities in the maintenance of an adequate medical school as part of the Dublin College of the National University. If any developments should extinguish Galway (as seems probable) or Cork (as seems possible), the National University College, Dublin, will of course gain in importance..

The Royal College of Surgeons, Dublin.

The medical school of the Royal College of Surgeons, Dublin, at present admittedly receiving a lower grade of students than Trinity College, is doomed, unless it secures a very substantial financial support, to close its doors. It cannot continue to

provide a pre-clinical training equal to that of institutions which secure State support or which have their own endowment. It has only survived up to the present because its object has been for its students to pass the qualifying examination and because it was not obliged to bear the expense of clinical instruction.

The National University.

University College, Cork.

This College owes its strength to the political importance of Southern Ireland rather than to any intrinsic excellence, past or present, of the medical school there. In the intelligent development of medical education in Ireland, Cork seems to be likely to play always a subordinate part, and certainly any innovations or advances to be accomplished in Ireland could not wisely be expected to develop in, and spread from, the Medical Faculty at Cork.

University College, Galway.

Galway, due to its remote location, its probably constant inadequacy of clinical material and to the rivalry of Cork and Dublin for the favours of the Free State Government, will probably cease to function as a Medical Faculty. In any event, Galway would follow at considerable distance behind Dublin in its intrinsic importance in Ireland or in its claims for assistance.

Chief Needs.

The Chief Needs of the Free State Schools are:-

(1) Better Clinical Facilities

This is understood to mean:-

- (a) Modern buildings adequately equipped, especially in the point of clinical laboratories for Pathology, Chemistry etc.,
 - (b) Some form of amalgamation or re-organisation of numerous small hospitals, so that the Medical Faculty would have a better control and more adequate clinical material at its disposal. The hiatus between the pre-clinical instruction and that obtained in the hospitals should be closed through placing the hospital under academic, instead of religious, auspices and direction.
- (2) The opportunity to allow a few able young men interested in Medical Science to continue their training by means of Resident or Travelling Fellowships grants which would enable them later to follow academic careers.
 - (3) Education of those responsible for medical instruction in Ireland in regard to more important conceptions of medical education and the complete abandonment of the idea that students' fees should be considered as properly the main source of support of a Medical Faculty. Such an orientation to those in charge of the medical schools is particularly important in the case of the colleges of the National University.
 - (4) Buildings, especially in the case of the National University College in Dublin, to house better departments of the Medical Sciences.
 - (5) It would seem advisable for the number of medical schools in Ireland to be reduced outright and to improve the remainder through increased support, whether from fees, gifts or Government subsidies or a combination of all three.

(5) Continued

Ideally, Ireland could be adequately served, and could even produce a reasonable number of graduates for service outside of England, if Belfast, Trinity College, the Dublin College of the National University were to be the only Faculties of Medicine.

Belfast.

The chief needs at Belfast at present are:-

- (1) Better Clinical Facilities for the Department of Gynecology and Obstetrics,
- (2) The opportunity to allow a few able young men interested in Medical Science to continue their training by means of Resident or Travelling Fellowships grants which would enable them later to follow academic careers.

Recommendations.Irish Free State.

The following suggestions are made regarding a development toward a satisfactory solution of the problems confronting Medical Education in Ireland. In several of the instances given below, steps must be initiated by the Irish; in some, however, it is possible that the Division of Medical Education could make an initial offer of co-operation.

- (1) The Irish Government will probably maintain an attitude regarding registration which will simplify the present situation by placing Ireland on the Dominion basis, reducing the total number of students in medicine considerably and resulting in the abandonment of medical instruction in Galway, the Royal College of Surgeons in Dublin and the nearly extinct and practically negligible Apothecaries' Hall in Dublin. Cork and Trinity College, Dublin, will suffer considerably in the number of students, and therefore financially. Their ultimate fate is difficult to predict at present. By the beginning of the Academic Year of 1926-1927, the situation will probably begin to be stabilised, and a clearer forecast can be made of the position and drawing power of the surviving schools in Ireland.
- (2) The Irish Government is determined to change the General Medical Council's control of Free State Schools; this change will be radical in its effects, and it is opposed as being likely to entail the loss of prestige for Irish Schools and their graduates. It would be advisable, in view of this determination on the part of the Irish Government, for it to appoint a commission of five men representing both clinical and pre-clinical branches and also each of the surviving faculties. The object of this commission should be to study medical education in Germany and the United States (and possibly France) with a view to

recommending to the Government a concerted scheme of procedure to place Irish medical education on a sound and comprehensive and national basis.

I would recommend, in case such a commission were favoured by the Irish Government, that the Division of Medical Education assist financially in sharing the expenses of such study.

- (3) Because of the present strength of the practitioners' point of view, and because amalgamation or re-organisation of hospital facilities would raise questions of exceptional difficulty, it would be wisest to expect the first steps towards a satisfactory system of medical education to be concerned with laboratory buildings, equipment, and teachers in the medical sciences. If the Government of the Irish Free State can be influenced by those most concerned in improving medical education there to show an intelligent and substantial interest in medical education in the National University, and after the subject has been adequately studied, the Irish Government might make large enough contributions, together with funds from Irish sources*, and possible assistance from the Rockefeller Foundation, to establish pre-clinical branches in Dublin on a sound and thorough basis. In these circumstances, co-operation of the Division of Medical Education would be advisable.
- (4) Constant touch with the hospital situation in Dublin should be kept by the officers of the Division of Medical Education so that, if consulted, they could have the opportunity to discourage any extension or continuance of the independence of clinical from pre-clinical instruction. It is possible that a time might come in 5 to 10 years when larger Academic control of existing clinics or an amalgamation on a basis of toleration and co-operation could be effected. No outside agency could wisely help to bring this about unless and until the local authorities are thoroughly convinced of the essential importance of placing hospital appointments and teaching under academic control.
- (5) As the above changes can only come about as a result of conviction of the part of the authorities of the Government, hospitals and schools, the more immediate problem in Irish medical education is one of encouraging, directly or indirectly, these authorities to become familiar with the conceptions and practices of medical education in countries outside their immediate range of experience. This can be effected in two ways:-

* For example, one hundred and fifty thousand pounds of the "White Cross" funds might be available.

(5) Continued

- (a) The first referred to under (2), a direct investigation and study by a group appointed for that purpose
- (b) The second through the slower, indirect, but very valuable medium of travelling fellowships for men who are later to occupy important posts in the teaching corps. Doctor H. F. Moore's position in Dublin, and the existence of the only bio-chemical laboratory in a Free State hospital, is a result of his study at the Rockefeller Institute. Though the number of such fellowships, under the coming contraction in Irish medical education, will be small, they are recommended, especially in the medical sciences, as being eventually highly useful - if not indispensable - to the complete maturity of the plans outlined above. I would limit applications to Trinity College and to the National University of Dublin, and wait at least until January, 1926, before taking up negotiations in this regard.

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Except for the last named, these recommendations are contingent upon possible, but by no means certain, developments of a situation whose future is difficult to foresee. The above plan and the conditions under which it might be accepted to enlist the support of the Division of Medical Education of the Rockefeller Foundation, are given for the sake of a clearer definition of what would be a satisfactory programme of medical education in the Free State.

B e l f a s t .

Aside from over-crowding, due to change in the status of the Free State Schools. conditions in Belfast are likely to remain stable. I would recommend initiating negotiations after January 1926, leading to the offering of departmental aid, (with a few subsequent travelling fellowships), in Physiology, Pathology and Hygiene, over a three year period on the plan adopted for France and Italy. This would not only demonstrate generally to the Belfast authorities the importance of adequate subordinate personnel in the proper functioning of this medical faculty, but it would provide, close at hand, training under competent teachers for a small number of the younger generation of Irishmen. No similar opportunity exists, or for the next few years, can exist in the Free State under the plan recommended for that country. \$10,000 a year for three years would give an adequate opportunity to apply such a programme, and would furnish an opportunity for academic careers in the medical sciences whose influence is most needed both in the Free State and in Northern Ireland.

No recommendation is made regarding Obstetrics and Gynecology, as this matter is at the present time purely a hospital proposal and not adequately linked with the Medical Faculty.